CHOICES FOR CARE (CFC) ADULT FAMILY CARE TIER SCORE SHEET

Date:	Name of Participant: _		
AA Provider:		Service Coordinator:	
AFC Tier:		_ Scored By:	
Independent Living Assessment (CI	FC AFC ILA). All answers th	nd needs as recorded in the VT Choices for Care Adult Family Care not are 0 (independent) or 8 (activity did not occur) are (zero) points so are not, write the points on the line to the right, then total the points from each	
STEP 1: Elimination Status:	Section 5D. Health As	ssessment, Page 17	
Section 5D.3. Bladder Incom	tinence Frequency	D.3 Points	
☐ If B One to three times we			
☐ If C Four to six times week	cly 5 points		
☐ If D One to three times date	ily 10 points		
If E Four or more times da	ily 20 points		
Section 5D.6. Bowel Incontinence Frequency		D.6 Points	
☐ If B One to three times we			
☐ If C Four to six times week	cly 5 points		
☐ If D One to three times date	ily 10 points		
☐ If E Four or more times da			
STEP 2: Section 6.A.Function	onal Assessment: Activ	vities of Daily Livings, (ADLs), Pages 18-20	
Section 6A.,1. A. Dressing		1.A Points	
☐If 1 Supervision	2.5 points		
If 2 Limited Assistance	5 points		
If 3 Extensive Assistance	10 points		
If 4 Total Assistance	15 points		
Section 6A., 2. Bathing		2.A Points	
☐If 1 Supervision	5 points		
If 2 Limited Assistance	10 points		
If 3 Extensive Assistance	15 points		
If 4 Total Assistance	23 points		
Section 6A., 3.A. Personal Hygiene		3.A Points	
If 1 Supervision	2.5 points	5.A I omts	
☐ If 2 Limited Assistance	5 points		
If 3 Extensive Assistance	7.5 points		
If 4 Total Assistance	10 points		
Section 6A., 4.A. Mobility in Bed		4.A Points	
If 1 Supervision	2.5 points	1111 Onto	
☐ If 2 Limited Assistance	2.5 points		
If 3 Extensive Assistance	5 points		
If 4 Total Assistance	10 points		
Section 6A., 5.A. Toilet Use	2	5.A Points	
☐If 1 Supervision	2.5 points		
If 2 Limited Assistance	5 points		
If 3 Extensive Assistance	10 points		
If 4 Total Assistance	20 points		

Section 6A., 6.A. Adaptive Dev	ices	6.A Points		
☐If 1 Supervision	2.5 points			
If 2 Limited Assistance	2.5 points			
If 3 Extensive Assistance	5 points			
If 4 Total Assistance	7.5 points			
		_	4 To 1 .	
Section 6A., 7.A. Transfer	0.5	7.	A Points	
If 1 Supervision	2.5 points			
If 2 Limited Assistance	5 points			
If 3 Extensive Assistance	7.5 points			
If 4 Total Assistance	12.5 points			
Section 6A., 8.A. Mobility		8.	A Points	
☐If 1 Supervision	2.5 points			
If 2 Limited Assistance	7.5 points			
If 3 Extensive Assistance	10 points			
If 4 Total Assistance	15 points			
_	1			
Section 6A., 9.A. Eating		9.	A Points	
☐ If 1 Supervision	2.5 points			
☐ If 2 Limited Assistance	7.5 points			
☐ If 3 Extensive Assistance	15 points			
☐If 4 Total Assistance	23 points			
STEP 3: Section 6B Functional	Assessment: Instrum	ental Activities of Daily	Living (IADLs) Page 21	
Section 6B., 2.A.Meal Preparati	ion	2.	A Points	
If 1 Done with Help	23 points			
If 2 Done by Others	30 points			
	r			
Section 6B., 3.A. Medications N	· ·	3.	A Points	
☐ If 1 Done with Help	2.5 points			
☐If 2 Done by Others	7.5 points			
Add all points from Step1, Step	2 & Step 3	•••••		
	. 10			
Total Score: Add 19 points to to	tal from step 1, 2, &3	3		
STEP 4: AFC Tier Determination	on: Look up the tier f	from the score ranges bel	ow.	
AFC Tier	Tier	Score	<u></u>	
	1 101	Less than 52		
	2	52 to 66	-	
	3	67 to 75	-	
	4	76 to 86	-	
	5	87 to 96	-	
	6	97 to 106	-	
	7	107 to 119	-	
	8	120 to 135	-	
	9	136 to 168	-	
	10	Greater than 168	†	